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Appl. No. 10/634,198
Amdt. Dated 01/29/05
Reply to Office Action of 10/29/04

UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/634,198 Confirmation No. 6873
Applicant : Stephen C. Jolley
Filed : August 6, 2003
TC/AU : 3618
Examiner : Kelly E. Campbell
Docket No. : BMA2325
Customer No. : 34356

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of **10/29/2004**, please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

JAN 29 2005

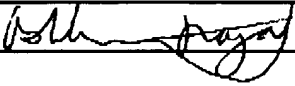
PTO/SB/21 (09-04)

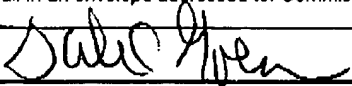
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/634,198	
	Filing Date	08/08/03	
	First Named Inventor	Stephen C. Jolley	
	Art Unit	3618	
	Examiner Name	Kelly E. Campbell	
Total Number of Pages in This Submission	10	Attorney Docket Number	BMA2325

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Nine page amendment in response to 10/29/04 Office Action.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Law Office of Ashkan Najafi, P.A.		
Signature			
Printed name	Ashkan Najafi		
Date	01/29/05	Reg. No.	49,078

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Dale C. Goerne	Date	01/29/05

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